## CITY OF COSTA MESA P. O. Box 1200 Costa Mesa, CA 92628-1200

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# APPLICATION FOR REVIEW, APPEAL OR REHEARING

Applicant Name Wendy Leece, Council Member
Address FT Fair Drive Costa Mesa, CA 92626
Phone
REQUEST FOR: REVIEW** APPEAL REHEARING
Decision of which review, appeal or rehearing is requested: (give number of rezone, zone exception, ordinance, etc., if applicable, and
the date of the decision, if known.) New Business #3 - Re! Empire Property
Medical Services - Paramedic System from March 1,
2011 meeting
Decision by: Council
Reasons for requesting review, appeal or rehearing:
1. Request for review and rehearing based on insufficient
notice to the public. The report did not come out until
Friday afternoon. I have had many residents complain who
did not have time to review the report or to arrange to
attend the meeting. I was given insufficient time to
analyze and review the city attorney opinion which I
received only a few minutes prior to the City Council meeting
Action may be in violation of anti-trust statutes
& employment contracts. Directing private
taramedics be offered this service may be
in solation and increase City's liability.
Date: 3/4/11 Signature: Description
For office use only – do not write below this line
SCHEDULED FOR THE CITY COUNCIL /PLANNING COMMISSION MEETING OF

SCHEDULED FOR THE CITY COUNCIL/PLANNING COMMISSION MEETING OF If review, appeal or rehearing is for person or body other than City Council/Planning Commission, date of hearing of review, appeal or rehearing:

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<sup>\*</sup> If you are serving as the agent for another person, please identify the person you represent and provide proof of agenc 91 in Id 1 - WW 106
\*\* Review may be requested only by City Council or City Council Member
Costa Mesa/Forms1/Application for Review-Appeal-Rehearing

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## CITY COUNCIL AGENDA REPORT

MEETING DATE: March 1,, 2011

ITEM NUMBER:

NB-3

SUBJECT:

FEASIBILITY AND REQUIREMENTS TO EVALUATE INCREASING CAPACITY TO

COSTA MESA EMERGENCY MEDICAL SERVICES-PARAMEDIC SYSTEM

DATE:

**FEBRUARY 23, 2011** 

FROM:

CITY MANAGER'S DEPARTMENT

PRESENTATION BY: THOMAS R. HATCH, ASSISTANT CITY MANAGER

FOR FURTHER INFORMATION

Thomas R. Hatch, Assistant City Manager at (714) 754-5328.

CONTACT:

Terry Matz, Interim Assistant City Manager at (714) 754-5688

## **RECOMMENDATION:**

Provide direction on whether to transmit a letter to the Medical Director of the Orange County Emergency Medical Services requesting that he determine the feasibility and requirements to evaluate the addition of the City's ambulance provider as added capacity to the current Costa Mesa Emergency Medical Service-Paramedic delivery system.

### **DISCUSSION:**

The Costa Mesa Fire Department provides high-quality, professional Advanced Life Support (ALS) services through the City's Emergency Medical Service-Paramedic Program. Mayor Pro-Tem Jim Righeimer has requested that the City Council examine the option of creating flexibility in the provision of paramedic services to determine if the City's ambulance provider could provide an efficient and cost-effective method to add capacity to our paramedic services.

State law governs the provision of ALS services and provides that no person or organization may provide these services unless that person or organization is part of the Emergency Medical Services (EMS) system of the local EMS agency. Orange County Emergency Medical Services (OCEMS) is the local EMS agency and is responsible for the approval of any emergency medical service-paramedic (EMT-P) provider in Orange County. The Costa Mesa Fire Department is an approved EMT-P provider.

Any potential EMT-P provider would have to be approved by OCEMS. Accordingly, if the City Council wishes to examine this option, staff should be directed to transmit a letter to Dr. Samuel Stratton, Medical Director for OCEMS and request that he provide Costa Mesa with information concerning the feasibility and requirements to evaluate the addition of the City's ambulance provider as a way to add capacity to the City of Costa Mesa EMT-P provider system.

Authorizing this letter will allow OCEMS to evaluate this concept and determine if our ambulance provider — Care Ambulance, would be authorized as a service provider and therefore an option for the City to consider for added capacity to our current system for the provision of paramedic services.

## **ALTERNATIVES CONSIDERED:**

The City Council may elect not to investigate the potential option for the provision of added capacity for Emergency Medical-Paramedic services to Costa Mesa.

## **FISCAL REVIEW:**

The fiscal impact for adding EMT-P system capacity cannot be determined at this time. Even if OCEMS authorized the City's current ambulance provider to be a paramedic service provider in concept for Costa Mesa, the City of Costa Mesa would likely need to conduct a formal bidding process to select a service provider. The requirements for any bidding process and any related fiscal impacts would need to be fully evaluated and that evaluation would occur at a later time.

## **CONCLUSION:**

The City Council is requested to discuss the concept of sending a letter to OCEMS to request that they study the feasibility and requirements for adding capacity to the City of Costa Mesa's Emergency Medical Service-Paramedic current system as described in the staff report.

Thomas R. Hatch

Assistant City Manager

Terry Matz/

Interim Assistant City Manager

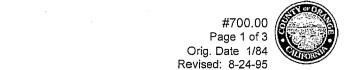
Attachments:

Attachment 1

OCEMS EMT-P Service Provider Criteria

Attachment 2

**Draft** Letter to OCEMS Medical Director



#### EMT-P SERVICE PROVIDER CRITERIA

#### I. AUTHORITY:

Health and Safety Code-1797.178. No person or organization shall provide advanced life support (ALS) unless that person or organization is an authorized part of the emergency medical services (EMS) system of the local EMS agency.

Title-22, 100168. A local EMS agency with an ALS system shall establish policies and procedures for the approval, designation, and evaluation through its quality assurance system, of all EMT-P service provider(s). These policies and procedures shall include provisions requiring an EMT-P to be affiliated with an approved EMT-P service provider in order to perform the scope of practice specified in this chapter for an EMT-P.

An approved EMT-P service provider shall: (T-22, 100167)

- Provide emergency medical service response on a continuous twenty-four (24) hours per day basis, unless otherwise specified by the local EMS agency, in which case there shall be adequate justification for the exemption (e.g., lifeguards, ski patrol personnel, etc.).
- 2. Utilize and maintain telecommunications as specified by the local EMS agency.
- Maintain a drug and solution inventory as specified by the local EMS agency, of basic and 3. advanced life support equipment, and supplies commensurate with the scope of practice.
- Have a written agreement with the local EMS agency to participate in the ALS program and to comply with all applicable State regulations and local policies and procedures, including participation in the local EMS agency's quality assurance system as specified in Section 100166 and 100168.

#### II. APPLICATION:

This policy defines the criteria for approval of an emergency medical service-paramedic (EMT-P) service provider and designation by the Orange County Emergency Medical Services (OCEMS)

#### III. CRITERIA:

- Based on State regulations and guidelines, County standards, and the Orange County Fire Service/Paramedic Master Plan, the EMT-P service provider shall identify the number of ALS units and geographical placements best suited to fulfill the prehospital emergency care needs in its jurisdiction.
- A prospective EMT-P service provider agency shall submit a written application to the OCEMS. The application shall include:
  - 1. A commitment of support from a responsible local government agency, i.e., city, County, or fire district.
  - 2. A commitment to respond, treat, and coordinate transport for any patient found within its service area.

ITALICIZED TEXT IDENTIFIES QUOTATIONS FROM AN AUTHORITY OUTSIDE THE OCEMS

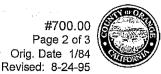
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#### **EMT-P SERVICE PROVIDER CRITERIA**



- 3. A commitment to provide emergency service response on a continuous 24 hour per day basis. Included shall be a listing of the provider agency response capabilities, e.g., the number of ALS units, number of paramedic assessment units, number of first responder units, and number of units with first responder defibrillation equipment.
- 4. A commitment to adhere to applicable sections of the California Health and Safety Code and to the OCEMS policies and procedures.
- 5. A commitment to provide ALS service meeting OCEMS staffing requirements for each unit. (2 EMT-Ps per ALS unit; 1 EMT-P per paramedic assessment unit.)
- 6. A list of all licensed and locally accredited EMT-Ps affiliated with the EMT-P service provider, identifying active or inactive status.
- 7. Information on geographical locations and primary response areas of proposed service units.
- Applicant's plan for adhering to Board of Supervisor's Resolution 79-240: "Written plan for responding EMT-P units into geographically contiguous areas on a mutual aid and/or back-up response when requested without regard to governmental boundaries". Each plan shall address the Board recommendations:
  - a. One unit for every 64,000 populations; or one unit per 16 square miles; or an average of five minutes, or less response time; or adjacent units are at or above 300 total responses/month.
  - b. Plan for implementing boundary drops within the fire net or modified net, including:
    - current boundary commitments and deadlines for future implementation;
    - closest paramedic unit responses irrespective of governmental boundaries:
    - consideration of centralized dispatch and communications;
    - automatic paramedic unit back-up coverage of at least 3-5 units;
    - commitment to internet mutual aid agreement.

#### 9. A commitment:

- To comply with OCEMS requirements for uniform record keeping, data collection and an OCEMS approved quality assurance plan as set forth by OCEMS policy and procedures.
- b. To maintain a paramedic program coordinator who will be the liaison person with the OCEMS and the assigned base hospital (BH).
- c. To notify the OCEMS of all EMT-P service provider operational modifications including:
  - 1) Proposed changes in number of units and/or unit locations.
  - 2) Major EMT-P service provider administrative personnel changes.
  - 3) Changes in status of licensed/accredited personnel.

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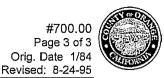
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#### Orange County EMS Policy/Procedure



#### EMT-P SERVICE PROVIDER CRITERIA



- To notify the OCEMS of all unusual incidents involving medical aid responses including but not limited to:
  - Patient complaints 1)
  - 2) Hospital complaints
  - 3) Ambulance company complaints
  - Violations of State or OCEM medical policies and procedures, protocols, rules, and/or regulations

(Included with each report of an unusual incident shall be a summary of the agency's internal response, if any, to the incident.)

- To work in conjunction with the OCEMS when evaluating EMT-P medical/communication equipment.
- To comply with treatment guidelines as approved by the OCEMS Medical Director.
- When feasible, to provide field internship opportunities to EMT-P trainees from the OCEMS approved paramedic training program.
- To provide orientation and training opportunities to EMT-P challenge candidates for local accreditation to practice.
- To work with the OCEMS in medical disaster preparedness.

#### 10. An internal policy for:

- a. The systematic reporting of radio communications problems to Orange County Communications for resolution.
- b. The routine dissemination of information to appropriate personnel from the OCEMS and its advisory committees.
- c. The timely reporting of infectious disease exposures.
- d. Resupplying of controlled substances and expendable medical supplies.
- e. Addressing the approved method for handling, transporting, storing, and disposing of biomedical waste.

#### IV. HEARING/SUSPENSION/REVOCATION:

- A. T-100168: The local EMS agency shall review its agreement plan with each EMT-P service provider at least every two years. Such agreement may be changed, renewed, canceled or otherwise modified, when necessary.
- B. The local EMS agency may deny, suspend, or revoke the approval of an EMT-P service provider for failure to comply with applicable policies.

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## DRAFT

March 2, 2011

Samuel J. Stratton, MD, MPH Medical Director Orange County Emergency Medical Services 405 W. Fifth Street Santa Ana, CA 92701

Re: Emergency Medical Services – Paramedic (EMT-P)

Dear Doctor Stratton:

The City of Costa Mesa provides Advance Life Support (ALS) services through the Costa Mesa Fire Department's Emergency Medical Services- Paramedic program. The Department has long provided excellent, high-quality emergency care for residents, businesses and visitors to our community.

The City is reviewing the way in which it delivers all of its services and is interested in reviewing methods for delivering the highest level for the Community. The City Council is interested in understanding whether it is feasible for our ambulance provider, Care Ambulance, to be authorized by Orange County Emergency Medical Services as a provider of paramedic services in Orange County and therefore an option for the City of Costa Mesa to consider as a way to add capacity to our paramedic system.

Accordingly, we are requesting that your agency make a determination as to the feasibility and requirements to evaluate our ambulance provider Care Ambulance for authorization by OCEMS as an Emergency Medical Service-Paramedic delivery system provider to add capacity to our existing Costa Mesa system.

Your assistance in this matter is greatly appreciated. If you have any questions, please contact me at 714-754-5328.

Sincerely,

Thomas R. Hatch Assistant City Manager